

OVERT AND SEMI-COVERT CONSULTANT QUALIFICATION CODE SHEET

CONTRACT No.	NAME: (FIRST 3 LETTERS OF LAST NAME)	DATE
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CARD COLUMN	10-11	12-13	14	15	16 - 20	21	22	23-24	25-26
ITEM	OFFICE	DATE OF BIRTH	SEX	TYPE OF CONTRACT	TERMINATION DATE OF CONTRACT	SCHEDULE	FUND	HIGHEST DEGREE	MAJOR
CODE									

CARD COLUMN	27 - 30	31-32	33 - 38	39 - 44
ITEM	COLLEGE	OTHER MAJOR EDUC. AREA	OCCUPATIONAL EXPERIENCE	OCCUPATIONAL EXPERIENCE
CODE				

CARD COLUMN	45 - 50	51 - 54	55 - 58	59 - 62
ITEM	OCCUPATIONAL EXPERIENCE	COLLEGE (PROFESSIONAL AFFILIATION)	COLLEGE (PROFESSIONAL AFFILIATION)	FOREIGN LANGUAGE
CODE				

CARD COLUMN	63 - 66	67 - 70	71 - 74	75 - 78	79	80
ITEM	FOREIGN LANGUAGE	AREA KNOWLEDGE	AREA KNOWLEDGE	AREA KNOWLEDGE	SECURITY	CARD No.
CODE						

CODED BY:

REVIEWED BY: